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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application of Docket Number		Filing Date		To be Mailed	
APPLICATION AS FILED - PART I										OTHER THAN		
(Cotumn 1)					(Column 2)		SMALL		OR		ALL ENTITY	
L_	FOR	Ň	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))		, or (c))			TV.					N/A		
	SEARCH FEE (37 CFR 1.16(k), (i)	, or (m))	· · ·		,		ŧ.]	N/A		
	EXAMINATION F (37 CFR 1.16(o), (p)						,			N/A	,	
	TAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x \$ =		
	EPENDENT CLAI CFR 1.16(h))			inus 3 = •			x \$ =			x \$ =		
	APPLICATION SIZ (37 CFR 1.16(s))	E FEE shee is \$2 addi	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				•					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
IN:	PAR	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)	·	RATE (\$)	ADDITIONAL FEE (\$)	
Ž	Total (37 CFR 1.18(i))		Minus	N/W	Ţ		x \$ =		OR	X \$50=	0	
AMENDMENT	Independent (37 CFR 1.18(h))		Minus 4				x \$ =		OR	X \$200=	0	
Ž	Application Size Fee (37 CFR 1.16(s))											
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						, :		OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	O O	
(Column 1) (Column 2) (Column 3)												
ENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	•	Minus		=		x \$ =		OR	X \$ =		
	Independent (37 CFR 1.16(h))		Minus	444	=		X \$ =		OR	x \$ =		
N N	Application Size Fee (37 CFR 1.16(s))											
AMENDA	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))						,,		OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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